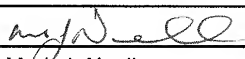


Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2008		Complete if Known Application Number 10/790,746-Conf. #2900 Filing Date March 3, 2004 First Named Inventor Franz ARMBRUSTER Examiner Name S. Haq Art Unit 1641 Attorney Docket No. 0756-0124P	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
TOTAL AMOUNT OF PAYMENT	(\$)	780.00	

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	

FEE CALCULATION								
1. BASIC FILING, SEARCH, AND EXAMINATION FEES								
	FILING FEES		SEARCH FEES		EXAMINATION FEES			
		Small Entity		Small Entity		Small Entity		
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)	
Utility	310	155	510	255	210	105		
Design	210	105	100	50	130	65		
Plant	210	105	310	155	160	80		
Reissue	310	155	510	255	620	310		
Provisional	210	105	0	0	0	0		
2. EXCESS CLAIM FEES								
							Small Entity	
							Fee (\$)	
Fee Description							Fee (\$)	
Each claim over 20 (including Reissues)							50	
Each independent claim over 3 (including Reissues)							210	
Multiple dependent claims							370	
							185	
Total Claims		Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims			
- =		x	=		Fee (\$)		Fee Paid (\$)	
HP = highest number of total claims paid for, if greater than 20.								
Indep. Claims		Extra Claims	Fee (\$)	Fee Paid (\$)				
- =		x	=					
HP = highest number of independent claims paid for, if greater than 3.								
3. APPLICATION SIZE FEE								
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof			Fee (\$)	Fee Paid (\$)		
- 100 =	/50 =	(round up to a whole number) x			=			
4. OTHER FEE(S)							Fees Paid (\$)	
Non-English Specification, \$130 fee (no small entity discount)								
Other (e.g., late filing surcharge): 2253 Extension for response within third month							525.00	
2401 Notice of Appeal							255.00	

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	36,623
Name (Print/Type)	Mark J. Nuell	Telephone	(858) 356-5959
		Date	July 1, 2008